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CONFIRMATION NO. 8870

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**APPLICANTS**

ROBERT H. REID, FAIRFIELD, PA;  
 JOHN E. VAN HAMONT, WEST POINT, NY;  
 WILLIAM R. BROWN, DENVER, CO;  
 EDGAR C. BOEDEKER, CROWNSVILLE, MD;  
 CURT THIES, BALLWIN, MO;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a REI of 08/242,960 05/16/1994 PAT 5,693,343  
 which is a CIP of 07/867,301 04/10/1992 PAT 5,417,986  
 which is a CIP of 07/805,721 11/21/1991 ABN  
 which is a CIP of 07/690,485 04/24/1991 ABN  
 which is a CIP of 07/521,945 05/11/1990 ABN  
 which is a CIP of 07/493,597 03/15/1990 ABN  
 which is a CIP of 06/590,308 03/16/1984 ABN

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 01/06/2000

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> PA	<b>SHEETS DRAWING</b> 19	<b>TOTAL CLAIMS</b> 24	<b>INDEPENDENT CLAIMS</b> 7
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

**ADDRESS**

30951

**TITLE**

MICROPARTICLE CARRIERS OF MAXIMAL UPTAKE CAPACITY BY BOTH M CELLS AND NON-M CELLS

<b>FILING FEE RECEIVED</b> 1300	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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